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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/052,417			ing Date 17/2002	To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)								SMALL	ENTITY	OR		HER THAN ALL ENTITY	
FOR			NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A		
	CFR 1.16(i))		minus 20 =		*			x \$ =		OR	x \$ =		
IND	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =		*			x \$ =			x \$ =		
	APPLICATION SIZE 37 CFR 1.16(s))	shee is \$2 addit	If the specification and d sheets of paper, the app is \$250 (\$125 for small e additional 50 sheets or fi 35 U.S.C. 41(a)(1)(G) ar			plication size fee due entity) for each fraction thereof. See							
	MULTIPLE DEPEN	NDENT CLAIM PR	7 CFR 1.16(
* If t	* If the difference in column 1 is less than zero, enter "0" in column 2.										TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY O			OTHER THAN DR SMALL ENTITY		
TN	10/31/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
AMENDMENT	Total (37 CFR 1.16(i))	* 44	Minus	** 80		=		x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))	* 9	Minus	***9		=		x \$ =		OR	x \$ =		
AM	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
DMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	P RESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	*	Minus	**		=		x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))	*	Minus	***		=		x \$ =		OR	x \$ =		
AMENDI	Application Size Fee (37 CFR 1.16(s))												
AN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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